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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	09/740,925
	Filing Date	19. December 2000
	First Named Inventor	H.-J. MÜSCHENBORN
	Group Art Unit	2131
	Examiner Name	HAYES, GAIL O.
	Attorney Docket Number	

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	Dr. HANS-JOACHIM MÜSCHENBORN
Signature	Dr. H. Müschenborn
Date	12. December 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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